WITED STATES PATENT AND TRADEMARK OFFICE

Inventor:	CHOI et al.	Examiner:	Naheed Ejaz
Application No.:	10/666,952	Art Unit:	2611
Filed:	September 17, 2003	Docket No.:	ATHEP128
Title:	REPETITION CODING I	FOR A WIRELESS S	SYSTEM

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in a prepaid envelope addressed to: Commissioner for Patents, Mail Stop ROE, P.O. Box 1450, Alexandria, VA

Veronica Pula

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL FILED WITH AMENDMENT B

Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

This is a Request for Continued Examination (RCE) under 37 CFR §1.114 of the above-identified application.

1. Submission required under 37 CFR §1.114

a. 🔲	Previously	submitted:
		Consider the amendment(s)/reply under 37 CFR §1.116 previously
	file	ed on
		Consider the arguments in the Appeal Brief or Reply Brief previously
	file	ed on
		Other
b. 🛛	Enclosed:	
	\boxtimes	Amendment/Reply
		Affidavit(s)/Declaration(s)
		Information Disclosure Statement (IDS)
		Other

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07/23/2007 SSITHIR1 00000014 10666952

c. Fee Calculation: The fee for excess claims, if applicable, has been calculated as shown below.

				Small Entity			Large Entity	
,				Rate	Fee		Rate	Fee
RCE FILING FEE			x \$395 = \$		OR	x \$790 = \$	790.00	
CLAIMS	After RCE	*HP	Extra			·•·		<u> </u>
Total	24	28		x \$25 = \$		OR	x \$50 = \$	
Independent	4	4		x \$100 = \$		OR	x \$200 = \$	
Multiple Dependent Claims -0-			x \$180 = \$		OR	x \$360 = \$		
*HP = Highest pr	reviously paid			TOTAL FEES \$			TOTAL FEES \$	790.00

2. Miscellaneous:						
a. Suspension of action	on the above-ide	entified ap	plicat	ion is request	ed under	
37 CFR §1.103(c) for a period	od of	mont	hs.	-		
b Other				· ·		
3. Applicant hereby petitions for	or an extension of	f time as f	ollow	S:		
	SMALL E			LARGE ENTITY		
	Rate	Add'l Fee		Rate	Add'l Fee	
Extension for Response within FIRST month	x \$60 = \$		OR	x \$120 = \$		
Extension for Response within SECOND month	x \$225 = \$,	OR	x \$450 = \$		
Extension for Response within THIRD month	x \$510 = \$		OR	x \$1020 = \$	•	
Extension for Response within FOURTH month	- 		OR	x \$1590 = \$		
Extension for Response within FIFTH month	x \$1080 = \$		OR	x \$2160 = \$		
Please charge Deposit Account to cover the additional claim fee If the required fees are missing of the subject application, please charge such	and/or extension or any additiona	n of time for al fees are	ees. requi	red during the	e pendenc	
No. 50-0685 (ATHEP128).						
8.	equest Form.					
9. Please continue to send corre	espondence to the	e following	g addi	ress:		
	OMER NO. 219	•				
	LT, YI & JAMES					
	•					
	Foothill Blvd., S					
_	ertino, CA 95014 3-2585 Fax (408)					
101 (400) 773	2303 I ax (400)) J=LJ/J				
Date: 7/16/07		Xan-	ch	*		

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Laura Ing

Reg. No. 56,859